

**SCHOOL OF PUBLIC HEALTH
COLLEGE OF MEDICINE AND HEALTH SCIENCES
UNIVERSITY OF GONDAR**

**PREVALENCE OF PREMARITAL SEXUAL PRACTICE AND
ASSOCIATED FACTORS AMONG PREPARATORY AND HIGH
SCHOOL STUDENTS IN DEBRETABOR TOWN, SOUTH GONDAR
ZONE,AMHARA REGION.**

BY: FISSEHA DIGSSIE (BSc)

NAME OF ADVISORS:

DR.GETU DEGU (PhD)

MR. DAGNAW ENGIDAW(Rs,Bsc,Msc)

**A THESIS PROPOSAL SUBMITTED TO THE SCHOOL OF PUBLIC
HEALTH, COLLEGE OF MEDICINE AND HEALTH SCIENCES,
UNIVERSITY OF GONDAR IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS FOR THE DEGREE OF MASTER OF PUBLIC
HEALTH.**

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GONDAR,ETHIOPIA

**SCHOOL OF PUBLIC HEALTH
COLLEGE OF MEDICINE AND HEALTH SCIENCES
UNIVERSITY OF GONDAR**

**MASTER OF PUBLIC HEALTH
RESEARCH PROJECT SUBMISSION FORM**

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Name of Investigator	Fisseha Digssie (BSc)
Name of advisor(s)	Getu Degu(PhD) Dagnaw Engidaw(Rs,Bsc,Msc)
Full title of the research project	Prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town,South Gondar Zone, Amhara Region.
Duration of the project	January- May 2011
Study area	South Gondar zone, Amhara Region
Total cost of the project	11,731.50
Address of investigator	Tel: 0918715355 Postal address: 124 E-mail: fiseha2003@gmail.com

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List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
AYRH	Adolescent and Youth Reproductive Health
BSc	Bachelor of Science
CI	Confidence Interval
DC	Data collector
HIV	Human Immunodeficiency Virus
IRB	Institution Review Board
MPH	Master of Public Health
OR	Odds Ratio
PI	Principal Investigator
RH	Reproductive Health
SPH	School of Public Health
SPSS	Statistical Package for Social Sciences
STDs	Sexually Transmitted Diseases
STIs	Sexually Transmitted Infections
WHO	World Health Organization

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Summary

Introduction: Ethiopia is a developing country with a demographic profile dominated by a young population. About 60 % of Ethiopia's population falls between the ages of 10-29, and 20 % is youth group. Because of the risky, often unprotected and non-voluntary nature of their sexual activities, adolescents and youth are most likely to contract STIs including HIV/AIDS, Early sexual debut and limited use of contraceptive methods have been associated with increased risks of unwanted pregnancy, STI/HIV infection, and maternal health mortality and morbidity.

Objective: The objective of this study is to assess the prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town, South Gondar zone, North west Ethiopia 2011.

Methods: School based cross sectional study will be conducted from January 2011 to May 2011 among preparatory and high school students in Debretabor town. Data will be collected using self administered questionnaire from a sample of 601 students, selected by stratified sampling method. Data will be entered and analyzed using SPSS version 17.0 software and both bivariate and multivariate logistic regression model will be used to identify predictors of premarital sexual practice and p-value less than 0.05 and 95% confidence interval(C.I) will be considered to be significant in the multivariate analysis.

Work plan and Budget: The whole study will be conducted from January to May 2011 and a total of 11,731.50 Ethiopian birr is required to finalize the study.

1. Introduction

1.1 Statement of the problem

The World Health Organization (WHO) defines adolescents as young people ages 10-19 years and youth 15-24 years. Adolescence is a period of dynamic change representing the transition from childhood to adulthood and is marked by emotional, physical, and sexual maturation. Habits that are formed during adolescence have major effects in adulthood. Youth cannot be defined as a homogeneous group. They vary by age, sex, education, marital status, and residence. Adolescents' health is directly affected by the socio-cultural and economic context in which they live. Therefore addressing the reproductive health needs of young people is complex. Early sexual debut and limited use of contraceptive methods have been associated with increased risks of unwanted pregnancy, STI/HIV infection, and maternal health mortality and morbidity (1).

Premarital sex can be defined as sexual relations outside the institution of marriage. Premarital sex is a leading cause to many negative effects. In the last 50 years alone, the number of all American women between the ages of 12 and 25 who had engaged in sex before marriage was 84%. A review of the 1999-2001 General Social Survey shows that the majority of American men lose their virginity by the age of 14. Over 60% of 16-21 year old males have had sex with more than one partner. People who have premarital sex are more likely to have long-term emotional, physical, social effects than people who choose to wait. Premarital sex leads to many issues such as molestation, rape, sexually transmitted diseases, abortions, single-parent families, and more. The most common effect that premarital sex leads to is STD's. Only 17% of all sexually active high school students practice safe sex. Unfortunately the teens with the most partners are the least likely to use condoms (2).

According to a recent study by the National Institute of Child Development and Human Development 33,000 Americans contract an STD every day and 2.5 million teens have

an STD. About 63 % of STD's occurs among people under age 25 and around 100,000 women are made sterile by gonorrhea in the U.S. every year. Just think how many of those cases could have been prevented if they made the right decision and didn't sleep with other individuals before marriage. Another reason that premarital sex should not take place is because of the risk of having an unwanted pregnancy. With becoming pregnant then one has to choose to have the child, give the baby up for adoption, or take away the babies life by abortion. They also have to face the reality they may be a single parent and loose all the chances and dreams they once had. Over one million teen pregnancies happen per year and 400,000 of them ended their pregnancy with abortion. There are on average 322,000 births to unmarried teenagers per year (3).

Ethiopia is a developing country with a demographic profile dominated by a young population. About 60 % of Ethiopia's population falls between the ages of 10-29, and 20 % is youth group. Because of the risky, often unprotected and non-voluntary nature of their sexual activities, adolescents and youth are most likely to contract STIs including HIV/AIDS, so that the highest infection rates in the country are currently seen among young people between the ages of 15 to 24 years. Young people, particularly those aged 15-24 years, are generally at a high risk of reproductive health problems, such as early marriage, nonconsensual sex, and sex work. Unwanted pregnancies entail significant risks for maternal health, including high rates of delivery-related complications and high abortion rates (4).

The current facility- based health care structure does not meet the unique service and informational needs of young people; nor does it effectively segment them by **factors** known to have a profound effect on their RH needs - factors that include marital status, age, educational attainment, household income levels, employment status, and urban or rural residence. One of the targets of national reproductive health strategy of Ethiopia is to increase the median age of first intercourse for women from 16.4 to 17 by 2010, and to 18 by 2015. By the year 2015, decrease by 20 % HIV prevalence among women in the age cohort 15-24 years (4).

One of the goals of national adolescent and youth reproductive health (AYRH) strategy of Ethiopia is to design and implement innovative and evidenced based AYRH programs that are segmented and tailored to meet diverse needs of youth by marital status, age, school status, residence, and sex, including younger adolescents and marginalized and most vulnerable young people in the context of Ethiopian priorities and culture (1).

Some studies are conducted on prevalence of premarital sexual practice in school students ,but no study is conducted among students in Deretabor town. Therefore studying the prevalence of premarital sexual practice and associated factors in school adolescents is important to decrease sexual and reproductive health problems in Debretabor town and in the country since it is a current problem in Ethiopia.

1.2 .Literature Review

1.2.1.Magnitude of Premarital sexual practice among adolescents

In Malaysia; a cross-sectional school survey conducted on 4,500 adolescent students using structured self-administered questionnaire showed that 5.4% was reported to have had sexual intercourse. The proportion among male students who had had sex was higher (8.3%) compared with female students (2.9%) and the mean age at first sexual intercourse was 15 years. One percent of students reported that they had been pregnant or had made someone else pregnant(5).

A cross sectional survey conducted in Madakaskar at the Antananarivo's university campus using self-administered to 320 randomly selected students. Approximately 80% of the participants reported sexual experiences, and the average age at sexual debut was 19 years. Only 5.7% reported consistent condom use. Common reasons for non-use were steady relationships (75.6%), the perception that condoms were useful only during ovulation periods (8.7%), and the decrease of pleasure (6.4%). The predictors of condom use were male gender, and the perception that condoms were useful during ovulation periods (6).

A study conducted in Mumbai on risk behaviors and misperceptions among low income College students with sample size of 966 (625 boys and 341 girls) showed that "any sexual experience" was reported by nearly half the boys (49%), only 26% reported sexual (vaginal) intercourse. Comparatively fewer girls reported either "any sexual experience" (13%) or sexual intercourse (3%). Among boys who had sexual intercourse, about 52% never used condom with their "regular" partner, and 56% never used condoms with "casual" partners. Among those with multiple partners, none reported consistent condoms use with all partners (7).

A cross sectional survey conducted among in-school and out-of-school unmarried adolescents aged 10 to 19 in Tanzania showed that about 32% of adolescents reported being sexually active; a higher proportion being males than females. The only inquired and reported sexual practices include vaginal sex, masturbation, oral and anal sex. About 15% of sexually active adolescents reported having multiple sexual partners. Significantly more males reported having multiple partners than females. Nearly 42% of sexually active adolescents reported having used a condom during most recent sexual act. Females reported older partners at first sexual act (8).

In Ethiopia, a cross-sectional study conducted in Nekemte town from February to March 2006 on 676 high school adolescents reported that 21.5% of the participants had had premarital sexual intercourse prior to the survey, of which 102 (70.3%) were males (9).

A comparative cross sectional study conducted in Dessie town and Dessie Zuria Woreda from March 1 to 15, 2008 on a total sample of size 1294 (647 urban and 647 rural) revealed that 51.3% of the youths have ever had sex. Rural youths initiate sexual intercourse at lower age than their urban counterparts with mean (16.49) for rural and (17.18) for urban youths. The median age at sexual debut was 16 years for rural and 17 years for urban (10).

A cross sectional study conducted on 360 Agaro high school students in February 2001 showed that 90(25%) of them had history of sexual intercourse. The average age of sexual debut was 16.74 years. Among those who had previous sexual exposure, 49(54.4%) used condom at least once. Of these, 23(46.9%) were using condom always(11).

A study done among youths in Harar revealed that the highest proportion, 48.1% of males and 37.8% of females, had their first sexual encounter at 15-17 years of age. About one third of the respondents had their first experience of sexual intercourse at ages of 18-19 and only 13.6% above the age of 20 years. The mean age at first sexual exposure among unmarried youths was 17.2 years (16.9 and 18 years for males and females respectively) (12).

A cross-sectional study conducted among Gedeo zone high school students from February to March, 2006; On a total of 720 unmarried students aged 14- 26 years revealed that 11.8% of the respondents reported sexual exposure prior to the study. The mean age of sexual debut for both sexes was 16.7 years. Females started sexual activity earlier than males (13).

A cross sectional study conducted in Ambo high school students from January 2006 to February 2006 on a total of 813 students showed that about 17.4% of the respondents had experienced sexual intercourse, 56.4% of the sexually active respondents claimed to have more than one sexual partners and about 17% of sexually active male adolescents visited female commercial sex workers of which only 27.6% reported consistent condom use and 44.8% never used condom during sex with female commercial sex workers (14)

1.2.2 Factors influencing premarital sexual practice among adolescents

A cross sectional study conducted in Skopje from March to April 2006 on 310 high school students showed that 62.7% of the boys and 26.7% of the girls are sexually active. In addition, a significant gender difference was found. The mean age of onset of sexual activity is 16 years for boys and 17 years for girls; concerning the duration of the relationship before the first sexual intercourse 33% of the boys and 2.5% of the girls had experienced one-night stand relationship and concerning the number of partners, having four or more sexual partners was reported by 29.8% of the boys and 5% of the girls (15).

A study conducted In China, Among 4,769 female students, 863 (18.10%) reported ever having sexual intercourse. several demographic, family, peer and work influences, and student factors (knowledge, and attitude toward sex) were risk factors for ever having sex. However, risk factors for multiple sex partners only included working in a place of entertainment, having current close friends that were living with boyfriends, poor academic performance, and positive attitudes toward multiple partners These women

also were more likely to practice masturbation, start having sex at a younger age, have sex with married men and/or men not their "boyfriends" at first coitus, and not use condoms consistently (16).

A study conducted in Israel, on sexual behavior and the socio demographic factors associated with initiating coitus using a self-administered questionnaire by a random sample of 4,609 high school students revealed that predictive variables of coitus initiation include gender, religiosity, immigration status, family structure, perceptions of academic achievements, and the proportion of peers practicing coitus. In addition to gender, perception of the proportion of peers that already practiced intercourse was the best predictor followed by grade, perception of academic achievement, and family structure (17).

A survey conducted in Korea on 1012 students to identify predictors of sexual intercourse showed that gender, socialization traits, and disinhibition were the statistically significant individual factors, and that parental living arrangement, career track, school record, having a boy-/girlfriend, and sexual permissiveness with a boy-/girlfriend were the statistically significant environmental factors associated with sexual intercourse by adolescents (18).

A cross sectional study conducted on 573 male college students in Kathmanda Nepal showed that 39% of the students had had premarital sexual intercourse. The study found that individual, family and peer characteristics such as alcohol consumption, smoking habits, attitude towards virginity, parents' education, parents' status (whether having single or both) and peers' sexual behavior had main effects on premarital sex among male students (19).

A study done in rural Jamaica on 748 attending public high schools in the parish of Hanover showed that 62.7% of participants were sexually experienced. For females sexual experience was associated with lack of parental monitoring while living with both biological parents delayed initiation of sexual activity For males lack of parental monitoring was a significant predictor of sexual experience. In this environment with high rates of adolescent pregnancy (20).

A cross sectional study conducted from september to October 2004 revealed socio demographic, behavioral, and psychosocial factors associated with heterosexual activity among a sample of 3556 male and female high-school students in Nairobi, Kenya. Approximately 50% of the males and 11% of females reported having had sexual intercourse at least once in their lifetime with a significant proportion reporting multiple sexual partnerships. Sexual activity was associated with various factors including religiosity, perceived parental attitudes towards sex, living arrangements, and school characteristics. However, the pattern of association differed for males and females. Results suggest that adolescents may benefit from sex education programs addressing multiple factors that may predispose adolescents to sexual activity, and that take into account gender (21).

A study carried out in Coast province, Kenya to estimate the prevalence of sexual intercourse among 236 school going adolescents showed that over all prevalence of sexual intercourse with in the last 12 months was 14.9%(22.2% in male and 5.0% in females).The risk factors for having sex among males were ever smoked,having close friends,currently drinking alcohol,using drugs and parental supervision.Meanwhile among female respondents,parental supervision was protective and the only factor was ever used drugs (22).

A study done among female adolescents in Addis Ababa showed that 71% of the sexually active females aged 15 to 19 years reported had casual sex. Moreover, maintaining relationship with male partner (51%), for the sake of passionate love (45.8%), and to overcome loneliness (40%) were the three most important reasons identified for sexual debut (23).

The national HIV AIDS behavioral surveillance survey also showed that 16% (19% of males and 13% of females) of the in-school youth had ever had sex. Among these the proportion was highest in the Oromia region (31.3%) and lowest in Addis Ababa (6.5%). More than 25% of the in-school youth had sex by the time they were 15 years old (24).

The two most common reasons for starting sex were personal desire (68%) and peer pressure (22%). Most male in school youth (49.3%) said that their first sexual partner had been close to their own age. In contrast, females reported that first sexual partners were often considerably older than they were. Accordingly, 35.4% reported that their first sexual partner had been 5-10 years older; moreover, 15% of all females youth reported that their first sexual partner had been more than 10 years .In this study commercial partners were reported by 1.5% in school youth. More over, non commercial partners were reported by 52.9% of in school youth (44.9% of males and 64.8% of females) who had sex during the previous 12 months (24).

The percentage of in-school youth reported more than one sexual partner in the previous 12 months was (16.9%). During their last sexual encounter with non commercial partners, 52.4% of in school youth (64.2% of males and 40.2% of females) had used a condom and 73.6% (79.2% of males and 64.4% of females) had used condoms consistently during the previous 12 months. More male than female youths reported using a condom with their last sexual partner (63.3% of males VS 45.5% of females). The commonest reasons for non use of condoms amongst the youth were partner trust (54.4%) and partner objection (9.4%) (24).

1.3 Justification of the study

More than 1 billion people in the world are between the ages of 15 and 24, and most live in developing countries (*Ethiop.J.Health Dev.* 2008;22)

Globally more than half of all new HIV infections are among 15-24 years of age and sexual activities are occurring in the midst of an HIV/AIDS pandemic that disproportionately affects adolescents and young adults. Premarital sex is associated with the unintended pregnancies, abortion, the spread of STI and HIV. This is evidenced by high rate of sexual transmitted infections among the 15-24 years old, and an increasing number of girls dropping out of schools due to unintended/unwanted pregnancies and other complications.

In Ethiopia there are some studies done on prevalence of premarital sex among in school youths, conducting this research is important because:

- No study conducted on prevalence of premarital sexual practice and associated factors in the study area.
- Factors affecting adolescents' sexual behavior differ from country to country, between cultures and also in different regions within a country.
- The number of students enrolled in schools is increasing and these students don't get adequate reproductive health services and may be practicing unsafe sex and exposed to STI/ HIV infection.
- This study will provide information on the current sexual behavior of students.
- The result of the study will be used to take appropriate interventions concerning the youth reproductive health by different stakeholders involved in HIV/AIDS prevention programs.

2. OBJECTIVES

2.1 General objective

- ❖ To assess the prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town.

2.2. Specific Objectives

- ❖ To determine the prevalence of premarital sexual practice among preparatory and high school students in Debretabor town.
- ❖ To identify factors associated with premarital sexual practice among preparatory and high school students in Debretabor town.

3. METHODS

3.1. Study Design

School based cross-sectional study will be conducted from January 2011 to May 2011

3.2. Study area and period

The study will be conducted in Debretabor town which is a capital of South Gondar zone. South Gondar zone is one of the eleven zones of Amhara region which is found 100kms from Bahirdar. It has 15 districts of which ten are rural districts and five are town districts. It has a total population of 2,451,990 (25).

Debretabor town has a total population of 68,739. Debretabor town has one preparatory and two high schools. There are a total of 6102 students attending class in 117 sections in 2010/2011 academic year. This study will be conducted from January to May 2011 (26).

3.3. Source Population

All preparatory and high school students of Debretabor town enrolled in second semester of 2010/2011 academic year.

3.4. Study Population

All regular preparatory and high school students of Debretabor town enrolled in 2010/2011 academic year will be the study population.

Inclusion and Exclusion Criteria

Inclusion criteria

All regular students who will be available at the data collection day will be included.

Exclusion Criteria

- All night time class students.
- Married students

3.5 Sample Size and Sampling Procedure

3.5.1 Sample Size Determination

The sample size will be determined using the formula for a single population proportion; based on the following assumptions;

the prevalence of premarital sexual practice (p) is 51.3 % (10), z-value of 1.96 at 95% confidence interval(CI) and margin of error (d) is 4%, and by assuming 10% non response rate and having the target population of 6,102 students .

$$n = \frac{(z / 2)^2 \times p (1-p)}{d^2}$$

$$n = \frac{(1.96)^2 (0.513 \times 0.487)}{(0.04)^2}$$

n= 600; but source population of the research project is less than 10,000 (N=6,102)

$$n_f = \frac{n}{(1 + \frac{n}{N})}$$

Where n_f = final sample size after correction; and N=source population

$$n_f = \frac{(600)}{(1 + \frac{600}{6102})}$$

$$n_f = 546$$

After adding 10% for non response rate, the sample size will be **601**.

3.5.2 Sampling procedure

Stratified sampling technique will be used to selecte the sample 601 from the total 6102. Stratification will be done by grade and the sample size will be proportionally allocated and the final sample will be selected by systematic random sampling method from each strata.

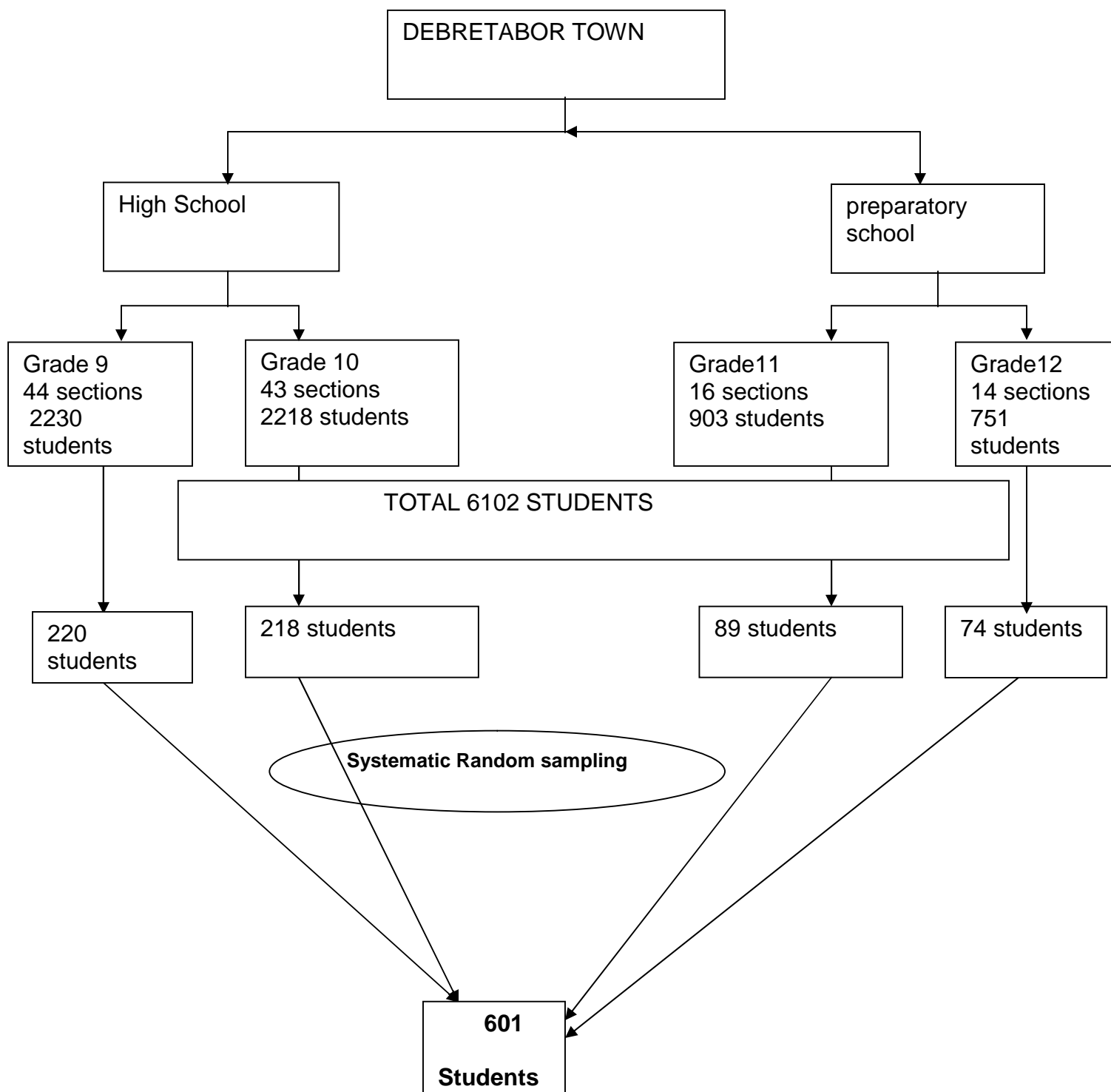


Fig.1. Diagrammatic Presentation of Sampling Procedure

3.6 Variables of the study

3.6.1 Dependent variable

Premarital sexual practice

3.6.2 Independent Variables

Socio-demographic characteristics

- Age
- Sex
- Educational level
- Place of residence
- Ethnicity
- Religion
- Pocket money
- Living arrangement

Risky behavior and peer pressure

- Chat chewing
- Drinking alcohol
- cigarette smoking
- night club/bar visiting
- peer chat chewing
- peer drinking alcohol
- peer cigarette smoking
- peer sexual initiation

Parental socioeconomic status and communication about sex matters:

- Parental educational level
- Parental occupational status
- Parental social status
- Sexual discussion with parents
- Sexual discussion with relatives
- Sexual discussion with peer

3.7 Operational definitions

Premarital sex- sexual relations outside the institution of marriage

Condom use- Consistent and correct use of condom during each sexual practice

Unsafe sex- unabstain or sexual intercourse with multiple sexual partners and/or sexual intercourse without condom

Sexually active- A student who had premarital sex at least once prior to this study

Early sexual intercourse- A penetrative sexual intercourse performed before the age of sexual maturity (less than 18 years of age for both sexes)

Safe sex- Abstinence before marriage, being faithful to a single partner, and/or consistent and correct use of condom at every sexual practice

3.8 Data Collection procedures

3.8.1 data collection instrument

A pretested, structured, close ended questions and self administered type of questionnaire prepared in English language will be used to collect data after translation into the Amharic language and back to English language

3.8.2 Data collection facilitators and supervisors

Eight BSc public health professionals (4 males and 4 females) as data collection facilitator and two instructors (1male and 1female) as supervisor and two school teachers as coordinator will be recruited to assist the research work at the time of data collection.

3.8.3 Data quality control measures

Before data collection, a clear introduction explaining the purpose and objective of the study to the respondents will be provided on the beginning page of the questionnaire. Data collection facilitators and supervisors will be trained for a day before and after pretest. A pretest will be conducted on 20 respondents one week prior to the actual data collection period at Gassay high school students with harmony of research assistant team and necessary modification of the questionnaire will be undertaken. A close supervision, honest communication and on spot decision in the field work phase will be implemented by the investigator.

During data collection, respondents will be arranged according to their educational level and sex in different rooms respectively. Each respondent will seat apart to each other and discussion alongside will not be allowed to maximize comfort, privacy; and avoid gender anxiety and shared responses. Female data collection facilitators and supervisor will be assigned to female respondents and male to male respondents. Teachers of the school will leave the room to minimize suspicion, shame and respondents will be briefed about the purpose and objective of the study and the confidentiality and privacy of the respondents' response will be ensured using computer pass word. After completing the questionnaire, the respondents themselves will put the questionnaire in the carton box.

3.9. Data processing and analysis

Data will be cleaned, coded, entered and analyzed using SPSS version 17.0 software. Proportion and summary statistics will be used to describe the study population in relation to relevant variables. Bivariate analysis will be carried out and variables having p-value less than 0.2 will be entered in to the multiple logistic regression model. Multiple logistic regression model will be used to identify predictors for premarital sexual practice and variable having p-value less than 0.05 will be considered as significantly associated with the dependent variable. 95% Confidence(CI) interval Odds Ratio(OR) will be computed.

4. Ethical consideration

Before data collection, ethical approval and ethical clearance letter will be obtained from Institution Review Board(IRB) of University of Gondar, college of medicine and health sciences. Then after, officials at different authorities in Debreabor education office, preparatory and high schools will be informed and communicated through formal letters from University of Gondar School of Public Health.

Verbal consent will be obtained from each respondents after explaining the purpose of the study. Confidentiality of the responses will be assured to the respondents by anonymity of the self administered questionnaire; keeping the privacy of the respondents while filling the questionnaire by seating apart to each other and arranging a collection box to drop the responses by the respondents themselves. The respondents will be told that they have a right to withdraw at any time or to put an end for single question, segment of questions or refuse to participate at all.

The collected data will be stored in key and locked system using computer password and information will not be handover to third party.

5. Dissemination of findings

The final report will be presented and discussed in University of Gondar, College of Medicine and Health Sciences, School of Public Health as partial fulfilment of the degree of Master of Public Health and the findings of this study will be disseminated to Amhara regional Health and education bureau, South Gondar zone health and education departments and for preparatory and high school administrations.

The findings will also be disseminated to different organizations that will have a contribution to promote health and prevent diseases related to adolescent reproductive health in the region and zone.

6. Work plan

S. No	Activity	Responsible person	Time period in months					
			Dec	Jan	Feb	Mar	April	May
1	Topic selection and defence	PI						
2	Preparation, presentation and submission of research proposal	PI						
3	Form link to get fund for the research	PI						
4	Preparation for field work	PI						
5	Travel to data collection site	PI & DC						
6	Training of data collectors and pretesting	PI & DC						
7	Data collection	PI & DC						
8	Data entry, processing and analysis	PI						
9	Submission of the first draft	PI						
10	Submission of final report and presentation of results to SPH	PI						

Fig.2 GANTT chart showing the work schedule

Key PI- Principal Investigator

DC- Data collector

SPH- School of Public Healt

7. Budget

7.1 Personal costs

Title	Number of participants	cost	Qualificati on	No of days	Total
Per diem					
-For data collectors	8	100.00	BSc HP	4 days	3200.00
-Supervisors	2	150.00	trachers	4 days	1200.00
-Coordinators	2	150.00	teachers	4 days	1200.00
-Principal investigator	1	150.00		4 days	600.00
Transport	1			2 trips	100.00
Total					6300.00

Transport is from Gondar to Debretabor

7.2 Equipment and supplies

Item	Quantity	Unit price	Total
Questionnaire (duplication)	630 (9 pages)	0.50	2,835.00
Print for Proposal and thesis	6 copies	2.00	600.00
Paper	1 ream	100.00	100.00
Pen	8	2.00	16.00
Pencil	4	1.00	4.00
Eraser	5	2.00	10.00
Total			3,565.00

7.3.Othercosts

Item	Total
Mobile card	200.00
Food and drink	600.00
Total	800.00

7.4 Total

Item	Total
Personal cost	6300.00
Supplies	3,565.00
Other	800.00
Total	10,665.00
Contigency(10%)	1,066.50
Grand Total	11,731.50

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Annex

Annex-I: Self-administered Questionnaire in English

University of Gondar, College of Medicine and health sciences,school of public health

Questionnaire prepared to study prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debreabor town,South Gondar zone, Amhara region.

Consent

My name is Fisseha Digssie, a final year Public Health student in Masters Program at University of Gondar. I brought these questions to you in order to find out prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debreabor town.. The purpose of this study is to get information on premarital sexual practice and associated factors among preparatory and high school students in Debreabor town that can be used to design appropriate intervention so as to address reproductive health problems. Therefore, your honest and genuine participation by responding to the questions prepared is highly appreciated and helpful to attain the objective of the study. Your name will not be written on this form and no individual response will be reported to any body. Hence, your answers are completely confidential. You do not have to answer any question that you don't want to answer and you may refuse to answer all of the questions. Please, if you cooperate by responding to the questions it means that you have your own contribution to the success of this study.

Are you willing to answer? yes ☐ no ☐

If yes, proceed to the next page

If no, please stop here.

Thank You!

Part-I: Socioeconomic and demographic characteristics

S.N ^o	Questions	Coding categories	Skip
Q101	What is your sex?	1. Male 2. Female	
Q102	What is your age in complete years?	_____year	
Q103	What is your educational level?	1. Grade 9 th 2. Grade 10 th 3. Grade 11 th 4. Grade 12 th	
Q104	What is your ethnicity?	1. Amhara 2. Tigray 3. Oromo 4. Others(specify)_____	
Q105	What is your religion?	1. Orthodox 2. Protestant 3. Catholic 4. Muslim 5. Others(specify)_____	
Q106	Have you ever attended religion institution?	1. Yes 2. No	
Q107	If your response for Q106 is “ Yes ”; How often do you attend religion institution?	1. Everyday 2. At least once in a week 3. At least once in a month 4. At least once in a year 5. When there is ceremony Others(specify)_____	
Q108	With whom do you live now? (Relatives: may include sister,	1. I live alone 2. With my father only 3. With my mother only 4. With my father and mother	

	brother, uncle, aunt and the like)	5. With my relatives 6. With other students 7. With my teacher 8. With my employer 9. With my friend 10. On the street 11. Others(specify)_____	
Q109	Do you have pocket money?	1. Yes 2. No	
Q110	If your response for Q109 is “ Yes ”; From where do you get it?	1. Parents 2. Brother(s)/sister(s) 3. Relatives: like uncle and aunt 4. Sexual partner 5. Peer friend 6. Others (specify)_____	

Part-II: Parental socio-economic status and communication about sexual issue

S.Nº	Questions	Coding categories	Skip If No, Q204
Q201	Is your mother alive?	1. Yes 2. No	
Q202	If your response for Q201 is “ yes ”; What is your mother’s educational status?	1. Unable to read and write 2. able to read and write 3. Grade 1-4 4. Grade 5-8 5. Grade 9-10 6. Grade 11-12 7. Above grade12	
Q203	If your response for Q201 is “ yes ”; What is your mother’s occupational status?	1. House wife 2. Civil servant employer 3. Private employer 4. Merchant 5. Daily laborer 6. Others(specify)_____	

Q204	Is your father alive?	1. Yes 2. No	If No, Q207
Q205	If your response for Q204 is “yes”; What is your father’s educational status?	1. Unable to read and write 2. able to read and write 3. Grade 1-4 4. Grade 5-8 5. Grade 9-10 6. Grade 11-12 7. Above grade12	
Q206	If your response for Q204 is “yes”; What is your father’s occupational status?	1. Civil servant employer 2. Private employer 3. Merchant 4. Daily laborer 5. Farmer 6. Others(specify)_____	
Q207	How do perceive your parents’ economic status?	1. Poor 2. Medium 3. Rich	
Q208	If your response for Q201 is “yes”; Have you ever discussed about sexual issue with your mother?	1. Yes 2. No	
Q209	If your response for Q204 is “yes”; Have you ever discussed about sexual issue with your father?	1. Yes 2. No	
Q210	Have you ever discussed about sexual issue with one of the following individuals? (Multiple answer is possible)	1. Sister(s) 2. Brother(s) 3. Relative(s) 4. Spouse 5. Others(specify)_____	
Q211	Do you have peer friend?	1. Yes 2. No	If No, Q213
Q212	If your response for Q211 is “yes”; Have you ever discussed about sex issues with your peer friend?	1. Yes 2. No	
Q213	Is there any reproductive health club in your school?	1. Yes 2. No	If No, Q217
Q214	If your response for Q213 is “yes”; Have you ever been a member of any school clubs ?	1. Yes 2. No	If No, Q217

Q215	If your response for Q214 is “ yes ”; To which of the following club(s) you have been a member? (Multiple answer is possible)	1. Anti HIV/AIDS club 2. Gender club 3. Virginity club 4. Others(specify)_____	
Q216	Have you ever discussed about sexual issue in any club?	1. Yes 2. No	
Q217	Do you think that keeping virginity up to marriage is important?	1. Yes 2. No	

Part -III: Risky behavior and peer pressure for premarital sexual practice

S.N^o	Questions	Coding categories	Skip
Q301	Have you ever chewed chat?	1. Yes 2. No	If No, Q304
Q302	If your response for Q301 is “ yes ”; Do you chew chat currently?	1. Yes 2. No	
Q303	If your response for Q302 is “ yes ”; How frequent do you chew?	1. Every day 2. At least once a week 3. At least once a month 4. At least once a year 5. Others (specify)_____	
Q304	Have you ever drunk alcoholic beverage? (Alcoholic beverage: may include tela, tej, areke, bear and the like...)	1. Yes 2. No	If No, Q307
Q305	If your response for Q304 is “ yes ”; Do you drink alcoholic beverage currently?	1. Yes 2. No	
Q306	If your response for Q305 is “ yes ”; How frequent?	1. Every day 2. At least once a week 3. At least once a month 4. At least once a year 5. Others (specify)_____	
Q307	Have you ever smoke cigarette?	1. Yes	If No,

		2. No	Q310
Q308	If your response for Q307 is “ yes ”; Do you smoke cigarette currently?	1. Yes 2. No	
Q309	If your response for Q308 is “ yes ”; How frequent do you smoke?	1. Every day 2. At least once a week 3. At least once a month 4. At least once a year 5. Others(specify)_____	
Q310	Have you ever watched sex film?	1. Yes 2. No	If No, Q313
Q311	If your response for Q310 is “ yes ”; Do you watch sex film currently?	1. Yes 2. No	If No, Q313
Q312	If your response for Q311 is “ yes ”; How frequent do you watch sex film?	1. Every day 2. At least once a week 3. At least once a month 4. At least once a year 5. Others(specify)_____	
Q313	Have you ever visited one of the following? (Multiple response is possible)	1. Night club 2. Pub/Bar/ 3. I have visited none of them 4. Others(specify)_____	
Q314	Does your peer friend chew chat?	1. Yes 2. No 3. I don't know	
Q315	Does your peer friend drink alcohol beverage?	1. Yes 2. No 3. I don't know	
Q316	Does your peer friend smoke cigarette?	1. Yes 2. No 3. I don't know	
Q317	Does your peer friend watch sex	1. Yes	

	film?	2. No 3. I don't know	
Q318	Did your peer friend initiate sexual intercourse?	1. Yes 2. No 3. I don't know	

Part- IV: History of premarital sexual practice and condom utilization

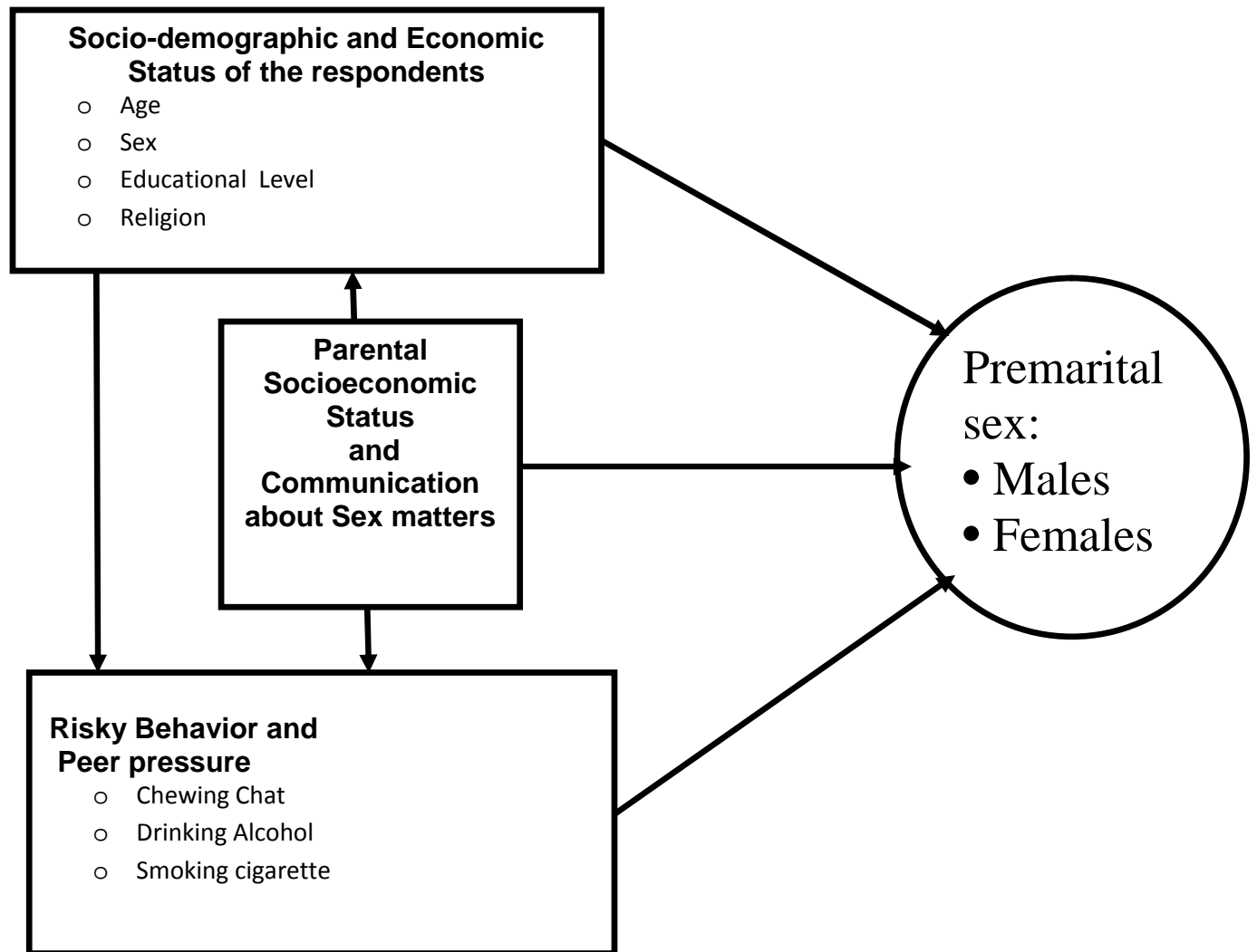
S. N ^o	Questions	Coding categories	Skip
Q401	Do you have boy/ girl friend?	1. Yes 2. No	
Q402	Have you ever had sexual intercourse? (For the purpose of this study, Sexual intercourse is restricted to only "Penetrative penile vaginal, penile oral and/or penile anal intercourse")	1. Yes 2. No	If No, stop! If Yes, continue.
Q403	If your response for Q402 is " yes "; What was the age of your first sexual partner when you had first sexual intercourse?	_____year	
Q404	If your response for Q402 is " yes "; At what age did you first have sex?	_____year	
Q405	What was your reason to had sex for the first time? (Substances : for the purpose of this study includes alcohol, chat, cigarette, hashish, Shisha, drugs and the like)	1. Fall in Love 2. Desire to practice sex 3. Raped/forced sex 4. Material gift 5. Peer pressure 6. Intoxicated with <u>substances</u> 7. initiated by sex film 8. Others(specify)_____	
Q406	With whom you had first sexual intercourse?	1. Girl friend/Boy friend	

		2. Cohabitant 3. Relative 4. Teacher 5. Causal 6. Commercial sex worker 7. Others(specify)_____	
Q407	Did you use condom when you had sex for the first time?	1. Yes 2. No 3. Did not remember 4. No response	
Q408	If your response for Q407 is “ No ”; What was the reason not to use condom? (Multiple response is possible)	1. Not available 2. Too expensive to buy 3. Not comfortable 4. Partner objection 5. Do not enjoy sex 6. In a hurry 7. Embarrassed to buy 8. Partner trust 9. Drunk (intoxicated) 10. Transmits HIV/AIDS 11. Didn't know how to use it 12. Didn't think it is necessary 13. Didn't think of it 14. Allergy(itching) 15. Other (specify)_____	
Q409	Did you have sexual intercourse in the past 12 months?	1. Yes 2. No	If No, Q411
Q410	If your response for Q409 is “ Yes ”; Did you use condom?	1. Yes 2. No	
Q411	Have you ever been pregnant? (Q411- Q412 for female respondents only)	1. Yes 2. No	If No, Q413
Q412	If your response for Q411 is “ yes ”; Was it planned?	1. Yes 2. No	
Q413	Have you ever made pregnant? (Q413- Q414 for male respondents only)	1. Yes 2. No 3. I don't know 4. Others (specify)_____	If No/I Don't Know, Q415

Q414	If your response for Q413 is “ yes ”; Was it planned?	1. Yes 2. No 3. I don't know 4. Others (specify)_____	
Q415	Have you ever had sexual intercourse with commercial sex workers? (Q415-Q418 for male respondents only)	1. Yes 2. No	If No, Q417
Q416	If your response for Q415 is “ Yes ”; Did you use condom?	1. Yes 2. No	
Q417	Did you have sexual intercourse with commercial sex workers in the last 12 months?	1. Yes 2. No	If No, Q419
Q418	If your response for Q417 is “ Yes ”; Did you use condom?	1. Yes 2. No	
Q419	How many sexual partners do you have so far?	_____	
Q420	Did you use condom at all your sexual experience?	1. Yes 2. No	If No, Q422
Q421	If your response for Q420 is “ Yes ”; Did you use condom correctly and consistently?	1. Yes 2. No 3. I am not sure 4. Others(specify)_____	
Q422	Have you ever tested for HIV/AIDS?	1. Yes 2. No	
Q423	If your response for Q422 is “ Yes ”; Did you know the test result?	1. Yes 2. No	

Thank you very much for your cooperation!

Annex-II Conceptual frame work



Annex-III: Information Sheet and Consent Form in English

Title of the Research Project:

Prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town, South Gondar zone, Amhara region, 2011.

Name of Investigator: Fisseha Digssie (BSc)

Name of the Organization: University of Gondar College of Medicine and Health Sciences, School of Public Health

Name of the Sponsor: University of Gondar

Information Sheet and Consent Form prepared for preparatory and high school students in Debretabor town who are going to participate in the research project entitled as “Prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town, South Gondar zone, Amhara Region, 2011”.

Introduction:

This information sheet and consent form is prepared with the aim of explaining the research project that you are asked to join by the group of research team. The main aim of this research project is to assess “The prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town, South Gondar zone, Amhara Region, 2011.”

This research team includes one principal investigator, eight Bsc health professionals as data collection facilitators, two supervisors who are Bsc holders, two coordinators who are Bsc holders and two advisors from University of Gondar.

Purpose of the Research Project: Most premarital sexual activities in adolescents are often unprotected and non-voluntary nature of their sexual activities, adolescents and youth are most likely to contract STIs including HIV/AIDS, They are exposed to unwanted pregnancy, unsafe abortion, school dropout and other complications including death.

There is no study conducted on prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town.

The purpose of this study is therefore to determine the magnitude of premarital sexual practice and to identify associated factors among preparatory and high school students in Debretabor town which is a very important input to effective designing, implementing and evaluating adolescent friendly intervention programs and to enhance reproductive health of in-school youth.

Procedure:

To assess the prevalence of premarital sexual practice and associated factors among preparatory and high school students in Debretabor town, South Gondar zone, 2011; we invite you to take part in this project. If you are willing to participate in this project, you need to understand and give your consent. Then; you are requested to give your response by the data collection facilitators.

For this questionnaire based study, study subjects are all preparatory and high school students in Debretabor town who are selected by chance. All the response given by participants will be kept confidential by using key and locked system like computer password whereby no one will have an access to it.

Risk and /or Discomfort:

By participating in this research project you may feel that it has some discomfort especially wasting your time (30 minutes) but this may not be too much as you are one of the member of the adolescents, so your response will help as an important input to show the magnitude and associated factors of premarital sexual practice which will be an important evidence to tackle the problem and to improve the quality of adolescent sexual health status. There is no risk in participating in this research project.

Benefits:

If you are participating in this research project, there may not be direct benefit to you but your participation is likely to help us to show the magnitude of premarital sexual practice, and associated factors among preparatory and high school students in Debretabor town and it will help to develop better intervention to improve adolescents' sexual health status.

Incentives/Payments for Participating:

You will not be provided any incentive or payment to take part in this research project.

Confidentiality:

The information collected from this research project will be kept confidential and information about you that will be collected by this study will be stored in a file, without your name. In addition, it will not be revealed to anyone except the investigator and it will be kept in key and locked system with computer pass ward.

Right to Refusal or Withdraw:

You have a full right to refuse from participating in this research (you have a right not to respond to some or all the questions) and this will not affect you from getting any kind of adolescent sexual health benefits or services from it. You have also the full right to withdraw from this study at any time you wish, without losing any benefits from this project.

Person to contact:

This research project will be reviewed and approved by the ethical committee of the University of Gondar.. If you have any question you can contact any of the following individuals (Investigator and Advisors) and you may ask at any time you want.

1. Fisseha Digssie (BSc): South Gondar Zone Health department

Cell phone: +251- 09 18 71 5355

E-mail: fiseha2003@gmail.com

2. Dr. Getu Degu (PhD): University of Gondar, College of Medicine and Health Sciences, School of Public Health

Cell phone: +251-09 18 77 6010

3. Mr. Dagnaw Engidaw(Rs,Bsc,Msc) : University of Gondar College of Medicine and Health sciences, School of Public Health

Cell phone: +251-09 18 35 0017

Annex-IV: Self-administered Questionnaire in Amharic ጎንደር ዩኒቨርሲቲ

የህክምና እና ጤና ሳይንስ ኮሌጅ የህብረተሰብ ጤና ትምህርት ክፍል በአማራ ክልል በደቡብ ጎንደር ዞን በደብረታቦር ከተማ በሚገኙ የመሰናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች መካከል ስለ ቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክንያቶች ለማጥናት የተዘጋጀ መጠይቅ

ፍስሐ ድግሴ እባላለሁ በጎንደር ዩኒቨርሲቲ በህብረተሰብ ጤና በማስትሬት ዲግሪ የመጨረሻ አመት ተማሪ ነኝ።እነዚህን ጥያቄዎች ለእናንተ የማቀርብበት ምክንያት በደብረታቦር ከተማ በሚገኙ የመሰናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች መካከል የቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክንያቶች ለማጥናት ነው።የዚህ ጥናት አላማ በደብረታቦር ከተማ በሚገኙ የመሰናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች መካከል ስለቅድመ ጋብቻ የግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክንያቶች በተመለከተ መረጃ ለመሰብሰብና በዚሁ አቅጣጫ ለሚከሰቱ የስነ ተዋልዶ የጤና ችግሮች መፍትሄ ለማምጣት ያመች ዘንድ ለሚወሰዱ እርምጃዎች እቅድ ለማወጣት ነው።ስለዚህ እርሰወ በዚህ መጠይቅ ውስጥ ያሉትን ጥያቄዎች በግልጽና በቅንነት ለመመለስ የምታደርጉት ትብብር እጅግ የሚደነቅ ሲሆን ለዚህ ጥናት አላማ መሳካት የራሱ የሆነ ጠቃሚ ድርሻ አለው። የምትመልሱትን መልሶች ሚስጥራዊነት ለመጠበቅ ሲባል በዚህ መጠይቅ ላይ ስማችሁን መጻፍ አያስፈልጋችሁም እንዲሁም የማንኛውም በጥናት ላይ የተሳተፈ ተማሪ መልስ ለየትኛውም አካል ተላልፎ አይሰጥም።በዚህ መጠይቅ ውስጥ ያለውን የትኛውንም ለመመለስ የማትፈልጉትን መልስ ወይም ጠቅላላውን ጥያቄ ላለመመለስ መብታችሁ የተጠበቀ ነው። እባክዎ ለጥያቄዉ መመለስ ቢተባበሩን ለጥናቱ መሳካት የራሰወን ጉልህ ድርሻ ተወጡ ማለት ነው።

ጥያቄዎቼን ለመመለስ ፈቃደኛ ነወት? አወ ☐ የለም ☐

አወን ካሉ ወደሚቀጥለው ገጽ ይቀጥሉ

የለም ካሉ እዚሁ ላይ ያቀርጡ

አመሰግናለሁ !!

ክፍል-1: ማሕበራዊ ሁኔታ የሚመለከቱ ጥያቄወች			
ተ.ቁ.	ጥያቄ	አማራጭ መልሶች	አለፍ
ጥ101	ፆታ	1. ወንድ 2. ሴት	
ጥ102	ዕድሜ	_____ ዓመት	
ጥ103	የትምህርት ደረጃ	1. 9ኛ ክፍል 2. 10ኛ ክፍል 3. 11ኛ ክፍል 4. 12ኛ ክፍል	
ጥ104	ብሄር	1. አማራ 2. ትግሬ 3. አሮሞ 4. ሌላ (ይጠቀስ)	
ጥ105	ሃይማኖት	1. ኦርቶዶክስ 2. ፕሮቴስታንት 3. ካቶሊክ 4. ሙስሊም 5. ሌላ (ይጠቀስ)	
ጥ106	ወደ ሃይማኖት ተቋማት ትሄዳለህ/ሽ?	1. አወ 2. አልሄድም	አልሄድም ከሆነ ወደ ጥያቄ 108
ጥ107	ምን ያህል ጊዜ ወደ ሃይማኖት ተቋማት ትሄዳለህ/ሽ?	1. በየቀኑ 2. ቢያንስ በሳምንት አንድ ጊዜ 3. ቢያንስ በወር አንድ ጊዜ 4. ቢያንስ በዐመት አንድ ጊዜ 5. በአል ሲኖር 6. ሌላ(ይጠቀስ)-----	
ጥ108	በአሁኑ ሰዓት ከማን ጋር ነው የምትኖረው/ሪው?	1. ለብቻ 2. ከአባቴ ጋር ብቻ 3. ከእናቴ ጋር ብቻ 4. ከሁለቱም ወላጆቼ ጋር 5. ከእህቶቼ ጋር 6. ከወንድሞቼ ጋር 7. ከጓኞቼ ጋር 8. ከዘመድ ጋር 9. ሌላ(ይጠቀስ)-----	
ጥ109	የኪስ ገንዘብ አለህ/ሽ?	1. አወ 2. የለም	

ጥ110	ለጥያቄ ተ.ቁ109 መልስህ/ሽ አወ ከሆነ ከየት ነዉ የምታገኘዉ/ኚዉ?	1. ከወላጆቼ 2. ከወንድሞቼ/እህቶቼ 3. ከዘመዶቼ አክስት አጎት ወዘተ... 4. ከጓደኛ 5. ሌላ(ይጠቀስ)-----	
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ክፍልII: የቤተሰብ ማህበራዊ ሁኔታንና ስለ ስራተ ፆታ ወይይትን በተመለከተ			
ጥ201	እናትህ/ሽ በህይወት አሉ?	1. አወ 2. የሉም	መልስህ/ሽ የሉም ከሆነ ወደ ጥያቄ204 እለፍ/ፊ
ጥ202	ለተ.ቁ 201 መልስህ/ሽ አወ ከሆነ የናትህ የትምህርት ደረጃ ምን ያህል ነዉ?	1. ማንበብና መጻፍ የማይችሉ 2. ማንበብና መጻፍ የሚችሉ 3. ከ1-4ኛ ክፍል 4. ከ5-8ኛ ክፍል 5. ከ9-10ኛ ክፍል 6. ከ11-12ኛ ክፍል 7. ከ12ኛ ክፍል በላይ	
ጥ203	ለተ.ቁ 201 መልስህ/ሽ አወ ከሆነ የእናተህ/ሽ ስራ ምንድን ነዉ?	1. የቤት እመቤት 2. የመንግስት ሰራተኛ 3. የግል ሰራተኛ 4. ነጋዴ 5. የቀን ሰራተኛ 6. ሌላ(ይጠቀስ)_____	
ጥ204	አባትህ/ሽ በህይወት አሉ?	1. አወ 2. የሉም	መልስህ/ሽ የሉም ከሆነ ወደ ጥያቄ 207 እለፍ/ፊ
ጥ205	ለተ.ቁ204 መልስህ/ሽ አወ ከሆነ የአባትህ/ሽ የትምህርት ደረጃ ምን ያህል ነዉ?	1. ማንበብና መጻፍ የማይችሉ 2. ማንበብና መጻፍ የሚችሉ 3. ከ1-4ኛ ክፍል 4. ከ5-8ኛ ክፍል 5. ከ9-10ኛ ክፍል 6. ከ11-12ኛ ክፍል 7. ከ12ኛ ክፍል በላይ	

ጥ206	ለተ.ቁ204 መልስህ/ሽ አወ ከሆነ የአባትህ/ሽ ስራ ምንድን ነው?	1. መንራስት ሰራተኛ 2. የግል ሰራተኛ 3. ነጋዴ 4. የቀን ሰራተኛ 5. ገበሬ 6. ሌላ(ይጠቀስ)-----	
ጥ207	የወላጆችህ/ሽ የኢኮኖሚ ደረጃ በአንተ/ቺ አስተያየት ምን ይመስላል?	1. ደሃ 2. መካከለኛ 3. ሃብታም	
ጥ208	ለተ.ቁ201 መልስህ/ሽ አወ ከሆነ ከአናትሽ ጋር ስለ ስራተ ፆታ ተወያይተህ/ሽ ታወቃለህ/ሽ?	1. አወ 2. አላወቅም	
ጥ209	ለተ.ቁ204 መልስህ/ሽ አወ ከሆነ ከአባትህ/ሽ ጋር ስለ ስራዐተ ፆታ ተወያይተህ/ሽ ታወቃለህ/ሽ?	1. አወ 2. አላወቅም	
ጥ210	ከዚህ በታች ከተጠቀሱት ግለሰቦች ጋር ስለ ስራዐተ ፆታ ተወያይተህ/ሽ ታወቃለህ/ሽ? (ከአንድ በላይ መልስ ይቻላል)	1. እህት 2. ወንድም 3. ዘመድ 4. ጓደኛ 5. ሌላ(ይጠቀስ)_____	
ጥ211	የአቻ ጓደኛ አለህ/ሽ?	1. አወ 2. የለኝም	መልስህ/ሽ የለኝም ከሆነ ወደ ጥያቄ 213 እለፍ/ፊ
ጥ212	ለተ.ቁ211 መልስህ/ሽ አወ ከሆነ ከአቻ ጓደኛህ/ሽ ጋር ስለ ስራዐተ ፆታ ተወያይተህ/ሽ ታወቃለህ/ሽ?	1. አወ 2. አላወቅም	
ጥ213	በትምህርት ቤታችሁ የስነ ተዋልዶ ጤና ክለብ አለ?	1. አወ 2. የለም	መልስህ/ሽ የለኝም ከሆነ ወደ ጥያቄ 217 እለፍ/ፊ
ጥ214	ለተ.ቁ213 መልስህ/ሽ አወ ከሆነ የክለቡ አባል ሁነህ/ሽ ታወቃለህ/ሽ?	1. አወ 2. አላወቅም	መልስህ/ሽ አላወቅም ከሆነ ወደ ጥያቄ 217 እለፍ/ፊ

ጥ215	ለተ.ቁ214 መልስህ/ሽ አወ ከሆነ ከሚከተሉት ክለብ አባል የነበርከው/ሽው ከየትኛው ነው? (ከአንድ በላይ መልስ ይቻላል)	1. ፀረ ኤች አይ ቪ ኤድስ ክለብ 2. ስነ ተዋልዶ ክለብ 3. የፆታ ክለብ 4. ደናግል ክለብ 5. ሌላ(ይጠቀስ)_____	
ጥ216	በክለቡ ስለ ስርዐተ ፆታ ተወያይታችሁ ታወቃላችኋል?	1. አወ 2. አናውቅም	
ጥ217	ድንግልናን እስኪያገቡ ድረስ ጠብቆ መቆየት አስፈላጊ ነው ብለህ/ሽ ታምናለህ/ሽ?	1. አወ 2. አላምንም	

ክፍል-III: የአቻ ጓደኛ እና የግል በሀርይ ለቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ያለውን ተፅዕኖ የሚያመለክቱ ጥያቄወች

ጥ301	ጫት ቅመህ/ሽ ታወቃለህ/ሽ ?	1. አወ 2. አላውቅም	መልስህ/ሽ አላውቅም ከሆነ ወደ ጥያቄ 304 እለፍ/ፊ
ጥ302	ለተ.ቁጥያቄ301 መልስህ/ሽ? አወ ከሆነ በአሁኑ ጊዜ ትቅማለህ/ሽ?	1. አወ 2. አልቅምም	
ጥ303	ለተ.ቁጥያቄ302 መልስህ/ሽ? አወ ከሆነ ምን ያህልጊዜ ትቅማለህ/ሽ?	1. በየቀኑ 2. ቢያንስ በሳምንት አንድ ጊዜ 3. ቢያንስ በወር አንድ ጊዜ 4. ቢያንስ በአመት አንድ ጊዜ 5. ሌላ(ይጠቀስ)_____	
ጥ304	አልኮል መጠጥ ጠጥተህ/ሽ ታወቃለህ/ሽ? (አልኮል መጠጥ ጠላ ጠጅ አረቂ ቢራ እና የመሳሰሉት)	1. አወ 2. አላውቅም	መልስህ/ሽ አላውቅም ከሆነ ወደ ጥያቄ 307 እለፍ/ፊ
ጥ305	ለተ.ቁጥያቄ304 መልስህ/ሽ አወ ከሆነ በአሁኑ ጊዜ አልኮል መጠጥ ትጠግለህ/ሽ?	1. አወ 2. አልጠግም	
ጥ306	ለተ.ቁጥያቄ305 መልስህ/ሽ? አወ ከሆነ ምን ያህልጊዜ ትጠግለህ?	1. በየቀኑ 2. ቢያንስ በሳምንት አንድ ጊዜ 3. ቢያንስ በወር አንድ ጊዜ 4. ቢያንስ በአመት አንድ ጊዜ 5. ሌላ(ይጠቀስ)_____	

ጥ307	ሲጋራ አጭሰህ/ሽ ታወቃለህ/ሽ?	1. አወ 2. አላወቅም	መልስህ/ሽ አላወቅም ከሆነ ወደ ጥያቄ 310 እለፍ/ ፊ
ጥ308	ለተቁ ጥያቄ 307 መልስህ/ሽ አወ ከሆነ በአሁኑ ጊዜ ታጨሳለህ/ሽ?	1. አወ 2. አላጨሰም	
ጥ309	ለተቁ ጥያቄ 308 መልስህ/ሽ አወ ከሆነ ምን ያህል ጊዜ ታጨሳለህ/ሽ?	1. በየቀኑ 2. ቢያንስ በሳምንት አንድ ጊዜ 3. ቢያንስ በወር አንድ ጊዜ 4. ቢያንስ በአመት አንድ ጊዜ 5. ሌላ(ይጠቀስ) _____	
ጥ310	የወሲብ ፊልም አይተህ ታወቃለህ/ሽ?	1. አወ 2. አላወቅም	መልስህ/ሽ አላወቅም ከሆነ ወደ ጥያቄ 313 እለፍ/ፊ
ጥ311	ለተቁ ጥያቄ 310 መልስህ/ሽ አወ ከሆነ በአሁኑ ጊዜ የወሲብ ፊልም ታያለህ/ሽ?	1. አወ 2. አላይም	መልስህ/ሽ አላይም ከሆነ ወደ ጥያቄ 313 እለፍ/ፊ
ጥ312	ለተቁ ጥያቄ 311 መልስህ/ሽ አወ ከሆነ ምን ያህል ጊዜ ታያለህ/ሽ?	1. በየቀኑ 2. ቢያንስ በሳምንት አንድ ጊዜ 3. ቢያንስ በወር አንድ ጊዜ 4. ቢያንስ በአመት አንድ ጊዜ 5. ሌላ(ይጠቀስ)-----	
ጥ313	ከዚህ በታች ከተጠቀሱት ቦታወች ሂደህ/ሽ ታወቃለህ/ሽ?	1. የምሽት ክለብ 2. ጭፈራ ቤት/ባር 3. ከሁሉም ሂጃ አላወቅም 4. ሌላ(ይጠቀስ)-----	
ጥ314	የአቻ ጓደኛህ/ሽ ጫት ይቅማል/ትቅማለች?	1. አወ 2. አይቅምም/አትቅምም 3. አላወቀም	

ጥ315	የአቻ ዓደኛህ/ሽ የአልኮል መጠጥ ይጠጣል/ትጠጣለች?	1. አወ 2. አይጠጣም/አትጠጣም 3. አላወቅም	
ጥ316	የአቻ ዓደኛህ/ሽ ሲጋራ ያጨሳል/ታጨሳለች?	1. አወ 2. አያጨስም/አታጨስም 3. አላወቅም	
ጥ317	የአቻ ዓደኛህ የወሲብ ፊልም ያያል/ታያለች?	1. አወ 2. አያይም/አታይም 3. አላወቅም	
ጥ318	የአቻ ዓደኛህ/ሽ ለግብረ ስጋ ግንኙነት ያነሳሳህል/ያነሳሳሻል	1. አወ 2. አያነሳሳኝም/አታነሳሳኝም 3. አላወቅም	

ክፍል-IV: የቅድመ ጋብቻ ግብረስጋ ግንኙነት ልምድ እና ጥንቃቄን የሚመለከቱ ጥያቄወች

ጥ401	ፍቅረኛ አለህ/ሽ?	1. አወ 1. የለኝም	
ጥ402	የግብረ ስጋ ግንኙነት ፈጽመህ ታወቃለህ/ሽ?(በዚህ ጥናት የግብረ ስጋ ግንኙነት ማለት የወንድ ብልት ከሴት ብልት ወይም የወንድ ብልት ከሴት አፍ ወይም የወንድ ብልት ከሴት ፊንጢጣ ግንኙነት ማለት ነው)	2. አወ 3. አላወቅም	መልስህ/ሽ አወ ከሆነ ቀጥል/ይ
ጥ403	ለተቁ ጥያቄ 402 መልስህ/ሽ አወ ከሆነ ለመጀመሪያ ጊዜ የግብረ ስጋ ግንኙነት የፈጸምከው/ሽዉ ፍቅረኛህ/ሽ እድሜዉ/ዋ ስንት ነበር?	_____ ዓመት	
ጥ404	ለተቁ ጥያቄ 402 መልስህ/ሽ አወ ከሆነ ለመጀመሪያ ጊዜ የግብረ ስጋ ግንኙነት የፈጸምከው/ሽዉ በስንት አመትህ/ሽ ነበር?	_____ ዓመት	

ጥ405	ለመጀመሪያ ጊዜ የግብረ ስጋ ግንኙነት እንድትፈጽም/ሚያደረገህ/ሽ ምክንያት ምን ነበር? (በዚህ ጥናት አደንዛዥ ዕፅ ማለት አልኮል ጫት ሲጋራ ሃሽሽ ሲሻ እና የመሳሰሉት ማለት ነው)	1. ፍቅር 2. የግብረ ስጋ ግንኙነት ፍላጎት 3. መደፈር 5. በስጦታ በመታለል 6. በጓደኛ ግፊት 7. አደንዛዥ ዕጽ 8. በወሲብ ፊልም በመነሳሳት 9. ሌላ(ይጠቀስ)-----	
ጥ406	ለመጀመሪያ ጊዜ የግብረ ስጋ ግንኙነት የፈጸምከው/ሽዉ ከማን ጋር ነበር?	1. ከፍቅረኛ 2. አብሮ ከሚኖር ሰዉ 3. ከዘመድ 4. ከአስተማሪ 5. በአጋጣሚ 6. ከሴተኛ አዳሪ 7. ሌላ(ይጠቀስ)_____	
ጥ407	ለመጀመሪያ ጊዜ የግብረ ስጋ ግንኙነት ስትፈጽም/ሚ ኮንደም ተጠቅመህ/ሽ ነበር?	1. አወ 2. አልተጠቀምኩም 3. አላስታወስም 4. መልስ የለም	
ጥ408	ለተቁ ጥያቄ 407 መልስህ/ሽ አልተጠቀምኩም ከሆነ ምክንያቱ ምን ነበር?(ከአንድ በላይ መልስ ይቻላል)	1. ስላልነበረ 2. ለመግዛት በጣም ዉድ ስለነበር 3. ስለማይመኝ 4. ስለተቃወመኝ/ችኝ 5. ደስታን ስለሚቀንስ 6. ችኩየ ስለነበር 7. ለመግዛት ስለአፈርኩ 8. ስለማምነዉ/ናት 9. ጠጥቸ(ሰክሬ) ስለነበር 10. ኤች አይ ቪ/ኤድስን ስለሚያስተላልፍ 11. አጠቃቀሙን ስለማላወቅበት 12. አስፈላጊ ስላልመሰለኝ 13. ስላላሰብኩበት 14. የሰዉነት መቆጣት(አለርጂ) ስለሚያስከትልብኝ 15. ሌላ(ይጠቀስ)-----	
ጥ409	ባለፉት 12 ወራት የግብረ ስጋ ግንኙነት ፈጽመሃል/ሻል?	1. አወ 2. አልፈጸምኩም	መልስህ/ሽ አልፈጸምኩም ከሆነ ወደ ጥያቄ ቁ411

			አለፍ/ፊ
ጥ410	ለተ.ቁ ጥያቄ 409 መልስህ/ሽ አወ ከሆነ ኮንደም ተጠቅመህ/ሽ ነበር?	1. አወ 2. አልተጠቀምኩም	
ጥ411	እርግዘሽ ታወቂያለሽ?(ከጥ411- 412 ለሴቶች ብቻ)	1. አወ 2. አላወቅም	መልስሽ አላወቅም ከሆነ ወደ ጥያቄ ቁ413 እለፊ
ጥ412	ለተ.ቁ ጥያቄ 411 መልስሽ አወ ከሆነ እርግዝናዉ የታቀደ ነበር?	1. አወ 2. አይደለም	
ጥ413	አስረግዘህ ታወቃለህ?(ከጥ413- ጥ414 ለወንዶች ብቻ)	1. አወ 2. የለም 3. አላወቅም 4. ሌላ(ይጠቀስ)-----	መልስህ የለም አላወቅም ከሆነ ወደ ጥያቄ ቁ415 እለፍ
ጥ414	ለተ.ቁ ጥያቄ 413 መልስህ አወ ከሆነ እርግዝናዉ የታቀደ ነበር?	1. አወ 2. አይደለም 3. አላወቅም 4. ሌላ(ይጠቀስ)-----	
ጥ415	ከሴተኛ አዳሪ ጋር የግብረ ስጋ ግንኙነት ፈጽመህ ታወቃለህ?(ከጥ415-ጥ418 ለወንዶች ብቻ)	1. አወ 2. አላወቅም	መልስህ አላወቅም ከሆነ ወደ ጥያቄ ቁ417 እለፍ
ጥ416	ለተ.ቁ ጥያቄ 415 መልስህ አወ ከሆነ ኮንደም ተጠቅመህ ነበር?	1. አወ 2. አልተጠቀምኩም	
ጥ417	ባለፉት 12 ወራት ከሴተኛ አዳሪ ጋር የግብረ ስጋ ግንኙነት ፈጽመሃል?	1. አወ 2. አልፈጸምኩም	መልስህ አልፈጸም ኩም ከሆነ ወደ ጥያቄ ቁ419 እለፍ
ጥ418	ለተ.ቁ ጥያቄ 417 መልስህ አወ ከሆነ ኮንደም ተጠቅመህ ነበር?	1. አወ 2. አልተጠቀምኩም	
ጥ419	እስከአሁን ስንት የግብረ ስጋ ተጋሪወች አሉህ/ሽ?		
	በሁሉም የግብረ ስጋ ግንኙነት		መልስህ/ሽ

ጥ420	ልምድህ ኮንደም ተጠቅመሃል/ሻል?	1. አወ 2. አልተጠቀምኩም	አልተጠቀምኩም ከሆነ ወደ ጥያቄ ቁ422 እለፍ/ፊ
ጥ421	ለተ.ቁ ጥያቄ 420 መልስህ/ሽ አወ ከሆነ በትክክልና የግብረ ስጋ በፈጸምክ/ሽ ጊዜ ሁሉ ኮንደም ተጠቅመህ/ሽ ነበር?	1. አወ 2. አልተጠቀምኩም 3. እርግጠኛ አይደለሁም 4. ሌላ(ይጠቀስ)_____	
ጥ422	የኤች አይ ቪ/ኤይድስ ምርመራ አድርገህ/ሽ ታወቃለህ/ሽ	1. አወ 2. አላወቅም	
ጥ423	ለተ.ቁ ጥያቄ 422 መልስህ/ሽ አወ ከሆነ የምርመራውን ውጤት ታወቃለህ/ሽ?	1. አወ 2. አላወቅም	

ስለ ትብብረወ እናመሰግናለን!!

Annex V: Information Sheet and Consent Form in Amharic

የመረጃ መስጫና የፈቃደኝነት መጠየቂያ ቅጽ

የጥናቱ ርዕስ፡ - በአማራ ክልል በደቡብ ጎንደር ዞን በደብረታቦር ከተማ በ 2003ዓ.ም የመሰናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች መካከል የቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክንያቶች ምንድን ናቸው የሚል ነው።

ጥናቱን የሚያካሂደው ፍስሐ ድግሴ

ጥናቱ እንዲካሄድ የሚያግዘው ድርጅት፡ - ጎንደር ዩኒቨርሲቲ ህክምና ና ጤና ሳይንስ ኮሌጅ የህብረተሰብ ጤና ትምህርት ክፍል

ወጭውን የሚሸፍነው፡- ጎንደር ዩኒቨርሲቲ

ይህ የመረጃና የፈቃደኝነት መጠየቂያ ቅጽ የተዘጋጀው በአማራ ክልል በደቡብ ጎንደር ዞን በደብረታቦር ከተማ በ 2003ዓ.ም የመሰናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች መካከል የቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክንያቶች ምንድን ናቸው የሚለውን በተመለከተ ለሚካሄደው ጥናት የተሳ ፊዎችን ፈቃደኝነት ለመጠየቅ ነው።

መግቢያ፤

ይህ የመረጃና የፈቃደኝነት መጠየቂያ የተዘጋጀው ለጥናቱ ተሳ ፊዎች ስለሚሳተፉበት ጥናት ማብራሪያ /መግለጫ ለመስጠት ነው። የጥናቱ ዋና አላምም በደብረታቦር ከተማ በ 2003ዓ.ም የመሰናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች መካከል የቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክንያቶች ምንድን ናቸው የሚለውን በተመለከተ ለሚካሄደው ጥናት የተሳ ፊዎችን ፈቃደኝነት ለመጠየቅ ነው። ጥናቱን የሚያካሂደው ቡድንም ዋና አጥኚ 8፤ ስልጠና የወሰዱ የመጀመሪያ ዲግሪ ያላቸው የጤና ባለሙያዎች ሁለት የመጀመሪያ ዲግሪ ያላቸው ተቆጣጣሪ መምህራን ሁለት የመጀመሪያ ዲግሪ ያላቸው አስተባባሪዎች ንዲሁም ሁለት የጥናቱ አማካሪዎች ከጎንደር ዩኒቨርሲቲ ይሳተፉበት ል።

የጥናቱ ዓላማ፤

አብዛኛውን ጊዜ ወጣቶች የሚፈጽሙት ቅድመ ጋብቻ የግብረ ስጋ ግንኙነት ጥንቃቄ የጎደለው ሲሆን ይህም ድርጊት ለአባላዘር በሽታ ለኤች አይ ቪ/ኤድስ እንዲሁም ላልተፈለገ እርግዝና ጥንቃቄ ለጎደለው ወርጃ ከትምህርት ገበታ መፈናቀልና ለሞት ሊያጋልጥ ይችላል።

በደብረታቦር ከተማ ስለ ቅድመ ጋብቻ የግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክኒያቶች ጥናት አልተጠናም። ስለዚህ ይህ ጥናት በደብረታቦር ከተማ መስናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች መካከል የቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክኒያቶች ምን እንደሆኑ ማጥናት የወጣቶችን ስነ ተዋልዶ የጤና ችግሮች ለመፍታት ጠቃሚ መረጃ በመስጠት ከፍተኛ አስተዋጾ ያደርጋል።

የጥናቱ ውጤት ለፖሊሲ ቀራጮች /አውጭዎች ለሌሎች ተመሳሳይ ጥናት ለሚያጠኑ አካላትና ድርጅቶች ጠቃሚ ግብዓት በመሆን ሊያገለግል ይችላል።

የጥናቱ ሂደት

በደብረታቦር ከተማ መስናዶና ሁለተኛ ደረጃ ትምህርት ቤቶች በሚገኙ ተማሪዎች የቅድመ ጋብቻ ግብረ ስጋ ግንኙነት ልምድ መጠንና ተዛማጅ ምክኒያቶችን ለማጥናት እናንተ የጥናቱ ተሳታፊ እንድትሆኑ እንጠይቃለን ። በጥናቱ ለመሳተፍ ፍቃደኛ ከሆኑ ስምምነትዎን እንዲገልጹ ይጠየቃሉ ለዚህ ጥናት ተሳታፊዎች የተመረጡት በአጣ ሲሆን በተሳታፊዎች የሚሰጡ መልሶች ሁሉ ሚስጢራነታቸው የተጠበቀ ነው።

በጥናቱ በመሳተፍ የሚከሰት ችግር ወይም አለመመቸት

የዚህ ጥናት መጠይቅ 30 ደቂቃ አካባቢ ይወስዳል። የሚሰጡን መረጃ /መልስ ተገቢውን የጤና ማሳሰቢያ ስራዎች ከመቀየስ አንፃር ጠቃሚ መረጃ በመሆን ሊያገለግል ይችላል። በመሆኑም በዚህ ጥናት በመሳተፍዎ የሚደርስ ምንም ዓይነት ጉዳት የለም።

ከጥናቱ የሚገኙ ጥቅሞች

በጥናቱ በመሳተፍ የሚገኝ ቀጥተኛ ጥቅም ባይኖርም በጥናት መሳተፍዎ የጥናቱ ውጤት ለፖሊሲ ቀራጮች /አውጭዎች ለሌሎች ተመሳሳይ ጥናት ለሚያጠኑ አካላት፤ ድርጅቶች ጠቃሚ ግብዓት በመሆን ሊያገለግል ይችላል።

በጥናቱ በመሳተፍ ስለሚገኝ ጥቅማጥቅም /ክፍያ

በጥናቱ በመሳተፍዎ ምንም አይነት ጥቅማ ጥቅሞች ወይም የገንዘብ ክፍያ አያገኙም፡፡

ምስጢራዊነትን በመተላለፍ

ለዚህ ጥናት የሚሰበሰበው መረጃ ሚስጢራዊነት የተጠበቀ ነው፡፡ ስለ ግል ህይወትዎ የሚሰጡትን ማንኛውም መራጀዎች ፋይል ተደርጎ የሚቀመጥ ሲሆን ስምዎትም አይፃፍም ፋይሉም በኮምፒውተር ፓስወርድ ይቆላል፡፡

በጥናቱ ያለመሳተፍ ወይም ጥናቱን የማቋረጥ መብት

በጥናቱ ያለመሳተፍ ሙሉ መብት አለዎት፡፡ ሁሉንም ጥያቄዎች ወይም ለከፊሎቹ መልስ አለመስጠት ይችላሉ፡፡ በተጨማሪም በማንኛውም ሰዓት ከጥናቱ የመውጣት ሙሉ መብት አለዎት፡፡

ለተጨማሪ መረጃ

ስለዚህ የምርምር ስራ ተጨማሪ መረጃ ለማግኘት ከፈለጉ የሚከተሉትን ዋና አጥኚ ወይም አማካሪዎች ከ ች በተጠቀሰው አድራሻ ማግኘት ይቻላል፡፡

1. አቶ ፍስሐ ድግሴ ዋና አጥኚ - ደቡብ ጎንደር ዞን ጤና መምሪያ

Cell phone: +251- 09 18 71 5355

E-mail: fiseha2003@gmail.com

2. ዶ/ር ጌጡ ደጉ አማካሪ - ጎንደር ዩኒቨርሲቲ

Cell phone: +251-09 18 77 6010

3. አቶ ዳኛዉ እንግዳዉ አማካሪ - ጎንደር ዩኒቨርሲቲ

Cell phone: +251-09 18 35 0017

Annex VI Declaration

I, the undersigned, senior MPH student declare that this thesis proposal is my original work in partial fulfillment of the requirement for the degree of Master of Public Health.

Name: Fisseha Digssie **Signature:** _____

Place of submission: School of Public Health, College of Medicine and Health Sciences, University of Gondar.

Date of Submission: _____

This thesis proposal work has been submitted with our approval as university advisors.

Advisors:

Name	Signature
1. <u>Dr.Getu Degu (PhD)</u>	_____
2. <u>Dagnaw Engidaw(Rs,Bsc,Msc)</u>	_____